Case 17-04904 Doc 1 Filed 02/21/17 Entered 02/21/17 10:17:02 Desc Main Document Page 1 of 47

| Fill in this information to identify your case: | | |
|---|-------------------------------|-----------------------------------|
| United States Bankruptcy Court for the: | | |
| NORTHERN DISTRICT OF ILLINOIS | | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | ☐ Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Par | rt 1: Identify Yourself | | | |
|-----|--|--|---|--|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). | Linda First name Marie Middle name | First name Middle name | |
| | Bring your picture identification to your meeting with the trustee. | Cisar Last name and Suffix (Sr., Jr., II, III) | Last name and Suffix (Sr., Jr., II, III) | |
| 2. | All other names you hav | re | | |
| | Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-9933 | | |

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Case number (if known)

Debtor 1 Linda Marie Cisar

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|--|
| 1. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and | ■ I have not used any business name or EINs. Business name(s) | ☐ I have not used any business name or EINs. Business name(s) |
| | doing business as names | EINs | EINs |
| | | EINS | EINS |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 906 S. Ardmore Ave. Villa Park, IL 60181 | |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | DuPage County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) | ☐ I have another reason. Explain. (See 28 U.S.C. § 1408.) |
| | | | |

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Case number (if known) Debtor 1 Linda Marie Cisar

| ⊃ar | t 2: Tell the Court About | Your Ba | nkruptcy Ca | ıse | | | |
|-----|---|---------|----------------------------------|--|---|--|---------|
| 7. | The chapter of the Bankruptcy Code you are | | | | of each, see <i>Notice Required by</i> f page 1 and check the appropria | v 11 U.S.C. § 342(b) for Individuals Filing for Bankrup te box. | otcy |
| | choosing to file under | ■ Ch | apter 7 | | | | |
| | | ☐ Ch | apter 11 | | | | |
| | | ☐ Ch | apter 12 | | | | |
| | | ☐ Ch | apter 13 | | | | |
| | | | | | | | |
| 3. | How you will pay the fee | | about how yo | ou may pay. Typ attorney is subi | pically, if you are paying the fee y | ck with the clerk's office in your local court for more courself, you may pay with cash, cashier's check, or rhalf, your attorney may pay with a credit card or check | noney |
| | | | | | tallments. If you choose this optots (Official Form 103A). | ion, sign and attach the Application for Individuals to | Pay |
| | | | I request that but is not req | it my fee be wa uired to, waive y | aived (You may request this option | on only if you are filing for Chapter 7. By law, a judge our income is less than 150% of the official poverty li in installments). If you choose this option, you must f | ne that |
| | | | | | | icial Form 103B) and file it with your petition. | iii out |
|). | Have you filed for bankruptcy within the | ■ No. | | | | | |
| | last 8 years? | ☐ Yes | | | | | |
| | | | District | | When | Case number | |
| | | | District | | When When | Case number | |
| | | | District | | when | Case number | |
| 10. | Are any bankruptcy cases pending or being | ■ No | | | | | |
| | filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate? | ☐ Yes | S. | | | | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| | | | Debtor | | | Relationship to you | |
| | | | District | | When | Case number, if known | |
| 11. | Do you rent your residence? | ■ No. | Go to I | ine 12. | | | |
| | residence : | ☐ Yes | s. Has yo | our landlord obta | ained an eviction judgment agair | st you and do you want to stay in your residence? | |
| | | | | No. Go to line | 12. | | |
| | | | | Yes. Fill out <i>In</i> bankruptcy per | | Judgment Against You (Form 101A) and file it with t | his |
| | | | | | | | |

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| Debtor 1 | Linda Marie Cisar | Document | Page 4 of 47 | Case number (if known) | |
|----------|-------------------|----------|--------------|------------------------|--|
| | | | | | |

| Part | Report About Any Bu | sinesses | You Own | as a Sole Propriet | or |
|------|---|--------------|-----------------------------|--|---|
| 12. | Are you a sole proprietor of any full- or part-time business? | ■ No. | Go to | Part 4. | |
| | | ☐ Yes. | Name | and location of busi | ness |
| | A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. | | Name | of business, if any | |
| | If you have more than one sole proprietorship, use a | | Numb | er, Street, City, State | e & ZIP Code |
| | separate sheet and attach it to this petition. | | Check | k the appropriate box | k to describe your business: |
| | | | | Health Care Busin | ess (as defined in 11 U.S.C. § 101(27A)) |
| | | | | Single Asset Real | Estate (as defined in 11 U.S.C. § 101(51B)) |
| | | | | Stockbroker (as de | efined in 11 U.S.C. § 101(53A)) |
| | | | | Commodity Broker | (as defined in 11 U.S.C. § 101(6)) |
| | | | | None of the above | |
| 13. | Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? | deadlines | s. If you in is, cash-fl | dicate that you are a ow statement, and fe | court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure |
| | For a definition of small | ■ No. | I am r | ot filing under Chap | ter 11. |
| | business debtor, see 11 U.S.C. § 101(51D). | □ No. | I am fi Code. | | 11, but I am NOT a small business debtor according to the definition in the Bankruptcy |
| | | ☐ Yes. | I am f | iling under Chapter | 1 and I am a small business debtor according to the definition in the Bankruptcy Code. |
| Part | 4: Report if You Own or | Have Anv | Hazardo | ous Property or Any | Property That Needs Immediate Attention |
| | Do you own or have any | | | . , , | . , |
| 14. | property that poses or is alleged to pose a threat of imminent and | ■ No. □ Yes. | What is | the hazard? | |
| | identifiable hazard to public health or safety? Or do you own any property that needs immediate attention? | | | liate attention is why is it needed? | |
| | For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? | | Where is | s the property? | Number, Street, City, State & Zip Code |
| | | | | | |

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Debtor 1 Linda Marie Cisar Document Page 5 of 47 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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| Deb | tor 1 Linda Marie Cisar | | Boodinon | Case numb | er (if known) |
|------|---|---------------------------|---------------------------------|---|---|
| Par | Answer These Quest | ions for Repo | orting Purposes | | |
| 16. | What kind of debts do you have? | | | nsumer debts? Consumer debts are definal, family, or household purpose." | fined in 11 U.S.C. § 101(8) as "incurred by an |
| | | | No. Go to line 16b. | | |
| | | | Yes. Go to line 17. | | |
| | | | | siness debts? Business debts are debts tment or through the operation of the bus | |
| | | | No. Go to line 16c. | | |
| | | | Yes. Go to line 17. | | |
| | | 16c. St | ate the type of debts you ow | e that are not consumer debts or busine | ss debts |
| 17. | Are you filing under Chapter 7? | □ No. I a | nm not filing under Chapter 7 | . Go to line 18. | |
| | Do you estimate that after any exempt property is excluded and administrative expenses | ar | | o you estimate that after any exempt pro lable to distribute to unsecured creditors | perty is excluded and administrative expenses ? |
| | are paid that funds will be available for | | | | |
| | distribution to unsecured creditors? | L | Yes | | |
| 18. | How many Creditors do | 1 -49 | | 1 ,000-5,000 | □ 25,001-50,000 |
| | you estimate that you owe? | □ 50-99 | | <u> </u> | <u> </u> |
| | | □ 100-199 □ 200-999 | | □ 10,001-25,000 | ☐ More than100,000 |
| 19. | How much do you | \$0 - \$50 , | 000 | ☐ \$1,000,001 - \$10 million | ☐ \$500,000,001 - \$1 billion |
| | estimate your assets to be worth? | □ \$50,001 | | ☐ \$10,000,001 - \$50 million | ☐ \$1,000,000,001 - \$10 billion |
| | | \$100,001 | | ☐ \$50,000,001 - \$100 million ☐ \$100,000,001 - \$500 million | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| | | □ \$500,001 | - \$1 million | □ \$100,000,001 - \$500 million | ☐ More than \$50 billion |
| 20. | How much do you | \$0 - \$50 , | 000 | ☐ \$1,000,001 - \$10 million | □ \$500,000,001 - \$1 billion |
| | estimate your liabilities to be? | \$50,001 | | ☐ \$10,000,001 - \$50 million | □ \$1,000,000,001 - \$10 billion |
| | 10 201 | \$100,001 | | ☐ \$50,000,001 - \$100 million | ☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion |
| | | □ \$500,001 | - \$1 million | □ \$100,000,001 - \$500 million | More than \$50 billion |
| Part | Sign Below | | | | |
| For | you | I have exam | ined this petition, and I decla | are under penalty of perjury that the infor | mation provided is true and correct. |
| | | | | l am aware that I may proceed, if eligible ief available under each chapter, and I c | e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7. |
| | | | | t pay or agree to pay someone who is n notice required by 11 U.S.C. § 342(b). | ot an attorney to help me fill out this |
| | | I request reli | ef in accordance with the cha | apter of title 11, United States Code, spe | ecified in this petition. |
| | | bankruptcy of and 3571. | case can result in fines up to | | or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519, |
| | | Linda Mar Signature of | | Signature of Debte | or 2 |
| | | Executed or | February 20, 2017 | Executed on | |
| | | | MM / DD / YYYY | | M / DD / YYYY |

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Debtor 1 Linda Marie Cisar Document Page 7 of 47 Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| /s/ William | Teitelbaum | Date | February 20, 2017 | |
|----------------|-------------------------|---------------|-------------------|---|
| Signature of | Attorney for Debtor | | MM / DD / YYYY | |
| \A/:!!!: T. | to the course | | | |
| William Te | eiteibaum | | | |
| Printed name | | | | |
| William Te | itelbaum | | | |
| Firm name | | | | |
| c/o Donald | l Leibsker | | | |
| 10 S. LaSa | Ille Street, Suite 1230 | | | |
| Chicago, I | | | | |
| | City, State & ZIP Code | | | |
| Contact phone | 630-202-8405 | Email address | lawbrt@aol.com | |
| 6274270 | · | | · | · |
| Bar number & S | tate | | | |

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Page 8 of 47 Document Fill in this information to identify your case: Debtor 1 **Linda Marie Cisar** Middle Name Last Name Debtor 2 First Name Middle Name (Spouse if, filing) Last Name NORTHERN DISTRICT OF ILLINOIS United States Bankruptcy Court for the: Case number (if known)

☐ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Par | 1: Summarize Your Assets | | |
|-----|--|--------------|--------------------------|
| | | Your a | ssets of what you own |
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 0.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 12,904.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 12,904.00 |
| Par | 2: Summarize Your Liabilities | | |
| | | | abilities t you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 11,230.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 32,117.00 |
| | Your total liabilities | \$ | 43,347.00 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 1,619.00 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 1,596.00 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | ur other sch | nedules. |
| 7. | Yes What kind of debt do you have? | | |
| | Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for | a nerconal | family or |

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

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Page 9 of 47 Case number (if known) Debtor 1 Linda Marie Cisar

From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

0.00 \$

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Total clai | m |
|--|------------|------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$ | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 0.00 |

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| Fill in this info | rmation to identify you | | | | |
|---|--|---|--|--|---|
| Dobtor 1 | industria identity year | r case and this filing: | | | |
| Deblori | Linda Marie Cis | ar | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | |
| United States B | Bankruptcy Court for the: | NORTHERN DISTR | ICT OF ILLINOIS | | |
| Casa numbar | | | | | |
| Case number | - | | | | ☐ Check if this is an amended filing |
| | | | | | amondod ming |
| | | | | | |
| Official Fo | orm 106A/B | | | | |
| Schedu | le A/B: Pro | perty | | | 12/15 |
| | | | only once. If an asset fits in more than o | one category list the asset | |
| hink it fits best. | Be as complete and accu ore space is needed, attac | rate as possible. If two m | narried people are filing together, both a s form. On the top of any additional pag | are equally responsible for s | supplying correct |
| Part 1: Describ | e Each Residence, Buildii | ng, Land, or Other Real E | State You Own or Have an Interest In | | |
| | · | | | | |
| . Do you own oi | r nave any legal or equital | ole interest in any reside | nce, building, land, or similar property? | | |
| No. Go to P | art 2. | | | | |
| ☐ Yes. Where | e is the property? | | | | |
| D. () | . W W.I I | | | | |
| Part 2: Describ | e Your Vehicles | | | | |
| | | cle also report it on So | | ered or not? Include any | vernoies you own that |
| someone else d | trucks, tractors, sport | , | hedule G: Executory Contracts and U | | venicies you own that |
| omeone else d B. Cars, vans, t □ No ■ Yes | trucks, tractors, sport | utility vehicles, motor | chedule G: Executory Contracts and L | Inexpired Leases. Do not deduct secured | claims or exemptions. Put |
| B. Cars, vans, 1 No Yes 3.1 Make: | • | utility vehicles, motor | cycles interest in the property? Check one | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| Someone else d Cars, vans, 1 No Yes 3.1 Make: Model: | Toyota Corolla | who has an | interest in the property? Check one only | Do not deduct secured the amount of any secu Creditors Who Have Cl | claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property. |
| Someone else d Cars, vans, f No Yes 3.1 Make: Model: Year: | Toyota Corolla 2014 | who has an | interest in the property? Check one only | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| Someone else d Cars, vans, f No Yes 3.1 Make: Model: Year: | Toyota Corolla 2014 ate mileage: 4 | Who has an Debtor 1 | interest in the property? Check one only | Do not deduct secured the amount of any secu Creditors Who Have Cl | claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property. Current value of the |
| Someone else d Cars, vans, 1 No Yes 3.1 Make: Model: Year: Approxim | Toyota Corolla 2014 ate mileage: 4 | Who has an Debtor 1 Debtor 2 3,900 At least o | interest in the property? Check one only only and Debtor 2 only ne of the debtors and another this is community property | Do not deduct secured the amount of any secu Creditors Who Have Cl | claims or exemptions. Put red claims on <i>Schedule D:</i> aims Secured by Property. Current value of the |
| Someone else d B. Cars, vans, f No Yes 3.1 Make: Model: Year: Approxim Other info Cher info No Yes Add the dol .pages you i | Toyota Corolla 2014 Paration: aircraft, motor homes, pats, trailers, motors, per paration at the portion have attached for Part per Your Personal and House | Who has an Debtor 1 Debtor 2 Debtor 1 Debtor 1 Check if (see instru | interest in the property? Check one only only and Debtor 2 only ne of the debtors and another this is community property | Do not deduct secured the amount of any secu Creditors Who Have Cl Current value of the entire property? \$10,611.00 d accessories accessories | claims or exemptions red claims on Schedu aims Secured by Prop Current value of portion you own |

6. Household goods and furnishings

Examples: Major appliances, furniture, linens, china, kitchenware

□ No

Official Form 106A/B Schedule A/B: Property

| Debtor 1 | Linda Marie | Document Page 11 of 47 | Desc Main |
|-------------|--|--|--|
| ■ Yes. | Describe | | |
| | | household goods and furnishings located Public Storage, Oakbrook Terrance, IL | \$1,000.00 |
| □No | les: Televisions a | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music I phones, cameras, media players, games | collections; electronic devices |
| | | 1 TV | \$100.00 |
| Example No | | I figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, co ions, memorabilia, collectibles | in, or baseball card collections; |
| Example No | nent for sports a les: Sports, photo musical instr Describe | ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoe | s and kayaks; carpentry tools; |
| ■ No | | s, shotguns, ammunition, and related equipment | |
| □ No | | othes, furs, leather coats, designer wear, shoes, accessories | |
| | | necessary wearing apparel | \$300.00 |
| ■ No □ Yes. | ples: Everyday je Describe Irm animals | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems | , gold, silver |
| ■ No | ples: Dogs, cats, Describe | birds, horses | |
| ■ No | ther personal ar | nd household items you did not already list, including any health aids you did not list formation | |
| | | of all of your entries from Part 3, including any entries for pages you have attached number here | \$1,400.00 |
| | escribe Your Finar | | |
| Do you ov | wn or have any | legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |

Official Form 106A/B Schedule A/B: Property page 2

| | | Case 17 | '-04904 | Doc 1 | Filed 02/21/17 Document | Entered 02/21/17 10:17:02 Page 12 of 47 | Desc Main |
|-----|-------------------|--|------------------------------|-------------------------------|---|---|-------------------------------|
| De | ebtor 1 | Linda Mari | e Cisar | | Document | Case number (if known) | |
| | ■ No | | - | | our home, in a safe dep | osit box, and on hand when you file your petitio | nc |
| | | | | | I accounts; certificates of ounts with the same ins | of deposit; shares in credit unions, brokerage h stitution, list each. | iouses, and other similar |
| | _ | | | | Institution r | name: | |
| | | | 17.1. | checking | Chase | | \$50.00 |
| | Examp | , mutual fund: oles: Bond fund | ds, investmer | | ith brokerage firms, mor | ney market accounts | |
| | joint vo ■ No | enture | | | · | orporated businesses, including an interes | t in an LLC, partnership, and |
| | ☐ Yes. | Give specific | | bout them e of entity: | | % of ownership: | |
| | Negotia Non-ne | able instrumer | nts include pe nts are th | rsonal check lose you canr | s, cashiers' checks, pro | egotiable instruments missory notes, and money orders. by signing or delivering them. | |
| | — 100. | Cive opcome n | | er name: | | | |
| 21. | | nent or pension bles: Interests i | | | (k), 403(b), thrift saving | gs accounts, or other pension or profit-sharing | plans |
| | _ | List each acco | | ly. account: | Institution r | name: | |
| 22. | Your sl | | sed deposits | you have ma | | tinue service or use from a company ctric, gas, water), telecommunications compan | ies, or others |
| | | | | | Institution r | name or individual: | |
| 23. | Annuiti | ies (A contract | for a periodi | c payment of | money to you, either fo | r life or for a number of years) | |
| | ☐ Yes | | Issuer name | and descripti | on. | | |
| 24. | | s in an educa C. §§ 530(b)(1 | | | n a qualified ABLE pro | ogram, or under a qualified state tuition pro | gram. |
| | ☐ Yes | | Institution na | me and desc | ription. Separately file the | ne records of any interests.11 U.S.C. § 521(c): | |
| | ■ No | • | | | rty (other than anythir | ng listed in line 1), and rights or powers exe | rcisable for your benefit |
| | ☐ Yes. | Give specific i | information a | bout them | | | |
| | | | | | ts, and other intellecture coeeds from royalties a | ual property and licensing agreements | |

Official Form 106A/B Schedule A/B: Property page 3

 $\hfill\square$ Yes. Give specific information about them...

| | | Case 17-049 | 004 Doc 1 | Filed 02/21/17 Document | Entered 02/21/17 10:17:02 Page 13 of 47 | Desc Main |
|---------------------------------|--|---|---|---|--|---|
| Deb | otor 1 | Linda Marie Cisa | ar | Document | Case number (if known) | - |
| ı | <i>Examp</i> ■ No | es, franchises, and onles: Building permits, Give specific informa | exclusive licenses | | n holdings, liquor licenses, professional licens | ses |
| Мо | ney or p | property owed to yo | ou? | | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| I | No | unds owed to you Give specific informat | tion about them, in | cluding whether you alre | ady filed the returns and the tax years | |
| ı | Examp ■ No | support les: Past due or lump Give specific informat | 27.1 | usal support, child supp | ort, maintenance, divorce settlement, property | v settlement |
| ı | Examp | | lisability insurance loans you made to | | efits, sick pay, vacation pay, workers' compe | nsation, Social Security |
| _ | | ts in insurance policyles: Health, disability | | health savings account (| HSA); credit, homeowner's, or renter's insural | nce |
| | | Name the insurance of | company of each p | policy and list its value. | | |
| | | Name the insurance of | company of each p Company name: | policy and list its value. | Beneficiary: | Surrender or refund value: |
| | | Name the insurance o | Company name: | oolicy and list its value. otector; CSV \$842.76 | · | |
| 32. 33. 33. | Any interior of the control of the c | erest in property thate the beneficiary of the has died. Give specific information against third partieurles: Accidents, employees: | Pru Life UL Pro at is due you from a living trust, exper ation s, whether or not byment disputes, in quidated claims of | n someone who has die ct proceeds from a life in you have filed a lawsu surance claims, or rights | Jacqueline Cisar ed surance policy, or are currently entitled to rec | value: \$843.00 |
| 32. 33. 34. | Any interior of the following interior of th | erest in property thate the beneficiary of the has died. Give specific information against third parties: Accidents, employees: Describe each claim. | Pru Life UL Production at is due you from a living trust, expensation s, whether or not by ment disputes, in quidated claims of the control of the contr | n someone who has die ct proceeds from a life in you have filed a lawsu sourance claims, or rights | Jacqueline Cisar ed surance policy, or are currently entitled to rec it or made a demand for payment s to sue | value: \$843.00 eive property because |
| 32. 33. 34. 10. 35. | Any interior of the control of the c | erest in property that are the beneficiary of the has died. Give specific information against third partieures: Accidents, employees: Accidents and unliques ancial assets you died. Give specific information ancial assets you died. | Pru Life UL Pro at is due you from a living trust, exper ation s, whether or not byment disputes, in quidated claims of id not already list ation | n someone who has die ct proceeds from a life in you have filed a lawsu surance claims, or rights | Jacqueline Cisar ed surance policy, or are currently entitled to rec it or made a demand for payment s to sue g counterclaims of the debtor and rights to | value: \$843.00 eive property because |
| 32. 33. 34. 10. 35. | Any interior of the control of the c | erest in property that are the beneficiary of the has died. Give specific information against third partieules: Accidents, employees: Accidents, employees each claim. Contingent and unliqued bescribe each claim. | Pru Life UL Pro at is due you from a living trust, exper ation s, whether or not byment disputes, in quidated claims of id not already list ation I of your entries fi ber here | n someone who has diect proceeds from a life in you have filed a lawsu surance claims, or rights fevery nature, including a | Jacqueline Cisar ed surance policy, or are currently entitled to rec it or made a demand for payment s to sue g counterclaims of the debtor and rights to | eive property because o set off claims |

No. Go to Part 6.

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Case number (if known) Document Debtor 1 **Linda Marie Cisar** ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 56. \$10,611.00 Part 3: Total personal and household items, line 15 57. \$1,400.00 58. Part 4: Total financial assets, line 36 \$893.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$12,904.00 Copy personal property total \$12,904.00

Official Form 106A/B Schedule A/B: Property page 5

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$12,904.00

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| | | | 111 FAUE 1.3 UL 4 | |
|---|-------------------------|-------------------|-------------------|-----------------------|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Linda Marie Cisa | • | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Current value of the portion you own | Amo | unt of the exemption you claim | Specific laws that allow exemption | |
|---|--|---|--|--|
| Copy the value from Schedule A/B | Chec | k only one box for each exemption. | | |
| \$10,611.00 | | \$2,400.00 | 735 ILCS 5/12-1001(c) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$1,000.00 | | \$1,000.00 | 735 ILCS 5/12-1001(b) | |
| | 100% of fair market value, up any applicable statutory limit | | - I | |
| \$100.00 | | \$100.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$300.00 | | 100% | 735 ILCS 5/12-1001(a) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| \$50.00 | | \$50.00 | 735 ILCS 5/12-1001(b) | |
| | | 100% of fair market value, up to any applicable statutory limit | | |
| | \$1,000.00 \$10,000 | \$1,000.00 | Copy the value from Schedule A/B \$10,611.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$1,000.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100.00 \$100% of fair market value, up to any applicable statutory limit \$100% of fair market value, up to any applicable statutory limit \$300.00 \$100% of fair market value, up to any applicable statutory limit \$50.00 \$50.00 | |

Case 17-04904 Doc 1 Filed 02/21/17 Entered 02/21/17 10:17:02 Desc Main Document Page 16 of 47 Debtor 1 Linda Marie Cisar Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Pru Life UL Protector; CSV \$842.76 735 ILCS 5/12-1001(b) \$843.00 \$843.00 **Beneficiary: Jacqueline Cisar** 100% of fair market value, up to Line from Schedule A/B: 31.1 any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

Yes

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|--------------------------------|---|---|--------------------|---|--|-----------------------------------|
| Fill in this i | information to identify you | | | | | |
| Debtor 1 | Linda Marie Cis | ar Middle Name | Last Name | | | |
| Debtor 2 (Spouse if, filing | g) First Name | Middle Name | Last Name | | | |
| United State | es Bankruptcy Court for the | NORTHERN DISTRICT OF ILLI | INOIS | | | |
| Case numb (if known) | er | | | | | if this is an led filing |
| | orm 106D ule D: Creditors | Who Have Claims S | Secured | by Property | | 12/15 |
| s needed, co number (if kn | ppy the Additional Page, fill it nown). | If two married people are filing togethe out, number the entries, and attach it to | | | | |
| ` | ditors have claims secured by | | | | | |
| ⊔ No. (| Check this box and submit t | his form to the court with your other s | schedules. Yo | u have nothing else to | report on this form. | |
| Yes. | Fill in all of the information | below. | | | | |
| Part 1: L | ist All Secured Claims | | | | | |
| for each clain | If more than one creditor has | more than one secured claim, list the cred is a particular claim, list the other creditors cal order according to the creditor's name | in Part 2. As | Column A Amount of claim Do not deduct the value of collateral. | Column B Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Toyo Servi | ta Financial ices | Describe the property that secures the | he claim: | \$11,230.00 | \$10,611.00 | \$619.00 |
| Creditor | 's Name | 2014 Toyota Corolla 43,900 n | niles | | | |
| _ | ox 5855 I Stream, IL 60197 | As of the date you file, the claim is: C apply. Contingent | Check all that | | | |
| Number | , Street, City, State & Zip Code | ☐ Unliquidated ☐ Disputed | | | | |
| Who owes t | the debt? Check one. | Nature of lien. Check all that apply. | | | | |
| Debtor 1 | , | An agreement you made (such as mo | nortgage or secu | red | | |
| Debtor 2 | only and Debtor 2 only | ☐ Statutory lien (such as tax lien, mech | hania'a lian) | | | |
| | ne of the debtors and another | ☐ Judgment lien from a lawsuit | nanics lien) | | | |
| | this claim relates to a | Other (including a right to offset) | | | | |
| Date debt wa | as incurred | Last 4 digits of account number | er | | | |
| Add the de | aller value of your ontrice in C | olumn A on this page. Write that number | oor horo: | ¢11 220 | 00 | |

Add the dollar value of your entries in Column A on this page. Write that number here: \$11,230.00
If this is the last page of your form, add the dollar value totals from all pages.
Write that number here: \$11,230.00

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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| <u> </u> | 0-30- E | Document | Page 18 of 47 | COO MAIN |
|---------------------------------------|---|--|---|---|
| Fill in this infor | rmation to identify your o | | | |
| Debtor 1 | Linda Marie Cisar | | | |
| Dobtor ! | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | NORTHERN DISTRICT OF IL | LINOIS | |
| Case number | | | | |
| (if known) | | | | Check if this is an |
| | | | | amended filing |
| Official For | m 106E/E | | | |
| | | ho Have Unsecured | Claime | 12/15 |
| | | | TY claims and Part 2 for creditors with NONPRIORITY of | |
| Schedule G: Exec Schedule D: Credi | utory Contracts and Unexpi itors Who Have Claims Secu entinuation Page to this page | red Leases (Official Form 106G). Ired by Property. If more space is | list executory contracts on Schedule A/B: Property (Off Do not include any creditors with partially secured clair needed, copy the Part you need, fill it out, number the sport in a Part, do not file that Part. On the top of any ac | ms that are listed in entries in the boxes on the |
| Part 1: List A | All of Your PRIORITY Un | secured Claims | | |
| 1. Do any credi | tors have priority unsecured | d claims against you? | | |
| No. Go to | Part 2. | | | |
| ☐ Yes. | | | | |
| Part 2: List A | All of Your NONPRIORIT | Y Unsecured Claims | | |
| 3. Do any credit | tors have nonpriority unsec | ured claims against you? | | |
| ☐ No. You ha | ave nothing to report in this pa | art. Submit this form to the court with | your other schedules. | |
| ■ Yes. | | | | |
| unsecured cla | aim, list the creditor separately | for each claim. For each claim liste | he creditor who holds each claim. If a creditor has more d, identify what type of claim it is. Do not list claims already have more than three nonpriority unsecured claims fill out | included in Part 1. If more |
| . u.t = | | | | Total claim |
| 4.1 Capita | l One | Last 4 digits of ac | count number | \$1,619.00 |
| Nonpriori | ity Creditor's Name | | | <u> </u> |
| | x 30281 ake City, UT 84130-028 | When was the deb | t incurred? | |
| Number | Street City, 01 64130-026 | | file, the claim is: Check all that apply | |
| Who inc | urred the debt? Check one. | | | |
| Debto | or 1 only | ☐ Contingent | | |
| ☐ Debto | or 2 only | ☐ Unliquidated | | |
| ☐ Debto | or 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At lea | ast one of the debtors and ano | ther Type of NONPRIO | RITY unsecured claim: | |
| | k if this claim is for a comn | | | |
| debt | aim subject to offset? | Obligations arisi report as priority cla | ing out of a separation agreement or divorce that you did no | ot |
| Is the cia | ann subject to onset? | <u></u> · · · | n or profit-sharing plans, and other similar debts | |
| | | · | | |
| ☐ Yes | | Other. Specify | revolving account | |

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Case number (if know)

| Chase | Last 4 digits of account number | \$2,094.00 |
|---|--|-------------|
| Nonpriority Creditor's Name PO Box 15298 | When was the debt incurred? | |
| Wilmington, DE 19850-5298 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No No | Debts to pension or profit-sharing plans, and other similar debts | |
| Yes | ■ Other. Specify revolving account | |
| Citi Cards | Last 4 digits of account number | \$16,816.00 |
| Nonpriority Creditor's Name PO Box 6241 | When was the debt incurred? | |
| Sioux Falls, SD 57117 | Then was the dest incurred. | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| ebt s the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not | |
| No | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | |
| ■ No ☑ Yes | Other. Specify revolving account | |
| 1 163 | Other: Specify | |
| Citi Cards | Last 4 digits of account number | \$0.00 |
| Nonpriority Creditor's Name PO Box 6500 Sioux Falls, SD 57117 | When was the debt incurred? | |
| Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | |
| Who incurred the debt? Check one. | | |
| Debtor 1 only | ☐ Contingent | |
| Debtor 2 only | ☐ Unliquidated | |
| Debtor 1 and Debtor 2 only | ☐ Disputed | |
| At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | |
| debt | Obligations arising out of a separation agreement or divorce that you did not | |
| s the claim subject to offset? | report as priority claims | |
| No | Debts to pension or profit-sharing plans, and other similar debts | |
| ☐ Yes | ■ Other. Specify notice only | |

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Case number (if know)

| | _ Liliua ivia | | | | idilibei (ii kiio | , | | \$8,542.00 |
|-----------------------|---|---|---|---------------------------------|------------------------------|---|-----------------------------------|---------------------------------|
| 4.5 | Discover Nonpriority Cre | editor's Name | Last 4 digits of account number | Last 4 digits of account number | | | | |
| | PO Box 15 | | When was the debt incurred? | | | | | |
| | Wilmington | n, DE 19850 | - A. (64) - L. (7) - (1) - (1) - (1) | | | | | |
| | | City State Zlp Code the debt? Check one. | As of the date you file, the claim | is: Checi | k all that apply | ' | | |
| | Debtor 1 on | | По :: . | | | | | |
| | | • | ☐ Contingent | | | | | |
| | ☐ Debtor 2 on | • | ☐ Unliquidated | | | | | |
| | | nd Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | |
| | _ | e of the debtors and another | Student loans | u ciaiiii. | | | | |
| | ☐ Check if the debt | is claim is for a community | ☐ Obligations arising out of a sep | aration ac | roomont or di | verce that you did n | not | |
| | | ubject to offset? | report as priority claims | aralion aç | greement or ar | voice that you did it | 101 | |
| | ■ No | | ☐ Debts to pension or profit-shari | ng plans, | and other sim | ilar debts | | |
| | ☐ Yes | | Other. Specify revolving a | accoun | t | | | |
| 4.6 | Kohl's | | Last 4 digits of account number | | | | | \$3,046.00 |
| | Nonpriority Cre | | | | | | | |
| | PO Box 31 ^o Milwaukee. | - | When was the debt incurred? | | | | | |
| | | City State Zlp Code | As of the date you file, the claim | is: Checl | k all that apply | • | | |
| | Who incurred | the debt? Check one. | - - | | | | | |
| | Debtor 1 on | nly | ☐ Contingent | | | | | |
| | Debtor 2 on | nly | ☐ Unliquidated | | | | | |
| | Debtor 1 an | nd Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one | e of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | | is claim is for a community | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not | | | | | |
| | debt | • | | | | | | |
| | _ | ubject to offset? | report as priority claims | | | | | |
| | No | | Debts to pension or profit-shari | | | ilar debts | | |
| | ☐ Yes | | Other. Specify revolving a | accoun | t | | | |
| Part 3 | 3: List Other | s to Be Notified About a Deb | t That You Already Listed | | | | | |
| is tr have noti | ying to collect from the more than one of the field for any debts 4: Add the A | om you for a debt you owe to sor creditor for any of the debts that s in Parts 1 or 2, do not fill out or mounts for Each Type of Un | secured Claim | n Parts 1 litional cr | or 2, then listeditors here. | t the collection ag If you do not have | ency here. Sir e additional po | milarly, if you ersons to be |
| | of unsecured cla | | ns. This information is for statistical | reporting | purposes or | ily. 26 U.S.C. §139. | . Add the amo | unts for each |
| | | | | | | Total Claim | | |
| | 6a. | Domestic support obligations | | 6a. | \$ | 0 | .00 | |
| | Total claims | | | | | | | |
| from | Part 1 6b. | | | 6b. | \$ | | .00 | |
| | 6c. 6d. | | njury while you were intoxicated ecured claims. Write that amount here. | 6c. 6d. | \$ | | .00 | |
| | ou. | Other. Add all other phonty unse | ecured claims. Write that amount here. | ou. | \$ | U | .00 | |
| | 6e. | Total Priority. Add lines 6a thro | ugh 6d. | 6e. | \$ | 0 | .00 | |
| | | | | | | Total Claim | | |
| | 6f. | Student loans | | 6f. | \$ | Total Claim 0 | .00 | |
| | Total | | | | | | _ | |
| | claims Part 2 6g. | Obligations arising out of a se | paration agreement or divorce that | | | _ | | |
| | | you did not report as priority of | laims | 6g. | \$ | | .00 | |
| | 6h. | Depts to pension or profit-sha | ring plans, and other similar debts | 6h. | \$ | 0 | .00 | |

Other. Add all other nonpriority unsecured claims. Write that amount

32,117.00

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Case number (if know) Document

Debtor 1 Linda Marie Cisar

Total Nonpriority. Add lines 6f through 6i.

\$ 6j. 32,117.00 Case 17-04904 Doc 1 Filed 02/21/17 Entered 02/21/17 10:17:02 Desc Main

| | | I A A A III I I I | 111 1 (1111) 7 / (11 7 | |
|---|--------------------------|-------------------|------------------------|--|
| Fill in this info | rmation to identify your | case: | | |
| Debtor 1 | Linda Marie Cisa | r | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Bankruptcy Court for the: | | NORTHERN DISTRICT | OF ILLINOIS | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

| | Person or | r company with Name, Numbe | whom you have the r, Street, City, State and ZIP (| contract or lease | State what the contract or lease is for |
|-----|-----------|-------------------------------|---|-------------------|---|
| 2.1 | | | | | |
| | Name | | | | _ |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.2 | | | | | |
| | Name | | | | |
| | Number | Street | | | _ |
| | City | | State | ZIP Code | _ |
| 2.3 | City | | State | Zii Code | |
| | Name | | | | |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | |
| 2.4 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| 2.5 | | | | | |
| | Name | | | | _ |
| | | | | | |
| | Number | Street | | | |
| | City | | State | ZIP Code | _ |
| | | | | | |

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| | | Docume | nt Page 23 o | of 47 |
|--------------------------------|---|------------------------------|-------------------------|--|
| Fill in this | information to identify your o | ase: | | |
| Debtor 1 | Linda Marie Cisar | | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 (Spouse if, filing | ng) First Name | Middle Name | Last Name | |
| | | | | |
| United Stat | tes Bankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | |
| Case numb | ber | | | |
| (if known) | | | | ☐ Check if this is an |
| | | | | amended filing |
| Official | l Form 106H | | | |
| | | | | |
| Sched | lule H: Your Code | eptors | | 12/15 |
| 1. Do y | and case number (if known). you have any codebtors? (If y | | | as a codebtor. |
| ■ No □ Yes | 3 | | | |
| | hin the last 8 years, have you a, California, Idaho, Louisiana, | | | y? (Community property states and territories include ington, and Wisconsin.) |
| ` | Go to line 3. Did your spouse, former spouse. | se, or legal equivalent live | with you at the time? | |
| in line Form | 2 again as a codebtor only if | that person is a guaran | tor or cosigner. Make s | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Officia 6G). Use Schedule D, Schedule E/F, or Schedule G to fi |
| | Column 1: Your codebtor Name, Number, Street, City, State and ZIP | Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 3.1 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| - | Number Street | | | _ |
| | City | State | ZIP Code | |
| 3.2 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule E/F, line |
| | | | | ☐ Schedule G, line |
| _ | Number Street | | | _ |
| | City | State | ZIP Code | |

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| Fill | in this information to iden | ntify your ca | ase: | | | | I | | | | |
|--------------------|---|--------------------------------------|--|---|--------------|------|----------------|---------------------|-----------|---------------------------------|----------|
| | | da Marie | | | | | | | | | |
| | btor 2 | | | | | _ | | | | | |
| Uni | ited States Bankruptcy Co | ourt for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | | |
| | se number nown) | | | | | | ☐ A sup | mended fi | showing | g postpetition llowing date: | |
| <u>O</u> | fficial Form 10 | <u>6l</u> | | | | | MM / | DD/ YYY | Ϋ́ | | |
| S | chedule I: You | ur Ince | ome | | | | | | | | 12/15 |
| spo atta Par | plying correct informati use. If you are separate ch a separate sheet to t | d and you his form. (ployment | r spouse is not filing wi | th you, do not inclu | ude infor | mati | on about you | ur spous | e. If mo | re space is | needed, |
| 1. | Fill in your employme information. | nt | | Debtor 1 | | | De | ebtor 2 or | non-fil | ing spouse | |
| | If you have more than cattach a separate page information about additionally employers. | with | Employment status | ☐ Employed■ Not employed | | | | Employe Not empl | | | |
| | Include part-time, seaso self-employed work. | onal, or | Occupation Employer's name | | | | | | | | |
| | Occupation may include or homemaker, if it appl | | Employer's address | | | | | | | | |
| | | | How long employed the | here? | | | | | | | |
| Pai | rt 2: Give Details A | About Mor | thly Income | | | | | | | | |
| spoi | mate monthly income a use unless you are separa | ated. | | , c | · | | | · | | • | J |
| | ou or your non-filing spous e space, attach a separat | | | ombine the information | on for all (| empi | oyers for that | t person o | n the IIr | nes below. If | you need |
| | | | | | | | For Debtor | | | otor 2 or ng spouse | |
| 2. | | | ry, and commissions (becalculate what the month) | | 2. | \$ | | 0.00 | \$ | N/A | |
| 3. | Estimate and list mon | thly overti | ime pay. | | 3. | +\$ | | 0.00 | ·\$ | N/A | |
| 4. | Calculate gross Incom | ne. Add lir | ne 2 + line 3. | | 4. | \$ | 0.0 | 00 | \$ | N/A | |

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| Deb | tor 1 | Linda Marie Cisar | _ | Case | number (if known) | | | | |
|-----|--|--|--|---|--|---|-------------------------------|--|----------------|
| | | | | | Debtor 1 | no | r Debtor 2 o n-filing spor | use | |
| | Сор | y line 4 here | 4. | \$_ | 0.00 | \$_ | | N/A | |
| 5. | List | all payroll deductions: | | | | | | | |
| | 5a. 5b. 5c. 5d. 5e. 5f. | Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations | 5a. 5b. 5c. 5d. 5e. 5f. | \$ \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 0.00 | \$ _ \$ _ \$ _ \$ _ \$ _ | | N/A N/A N/A N/A N/A | |
| | 5g. | Union dues | 5g. | \$ | 0.00 | \$_ | | N/A | |
| | 5h. | Other deductions. Specify: | 5h.+ | \$ | 0.00 | + \$_ | | N/A | |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | 0.00 | \$_ | | N/A | |
| 7. | Cald | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | 0.00 | \$_ | | N/A | |
| 8. | 8b. 8c. 8d. 8e. 8f. 8g. 8h. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: son's contribution | 8c. 8d. 8e. | \$ \$ \$ \$ \$ \$ | 0.00 0.00 0.00 0.00 1,086.00 0.00 0.00 533.00 | \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - \$ - | | N/A N/A N/A N/A N/A N/A | ı |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 1,619.00 | \$_ | | N/A | |
| 10. | Cald | culate monthly income. Add line 7 + line 9. | 10. \$ | | 1,619.00 + \$ | | N/A = | \$ | 1,619.00 |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | | | | | | | |
| 11. | Inclu othe | e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your r friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | depen | • | , | • | Schedule J. 11. + | S | 0.00 |
| 12. | | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies | | | | | 12. \$ | mbine | 1,619.00 ed |
| 13. | Dos | ou expect an increase or decrease within the year after you file this form | ? | | | | mo | nthly | income |
| 10. | | No. Yes. Explain: | • | | | | | | |

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| - ::::: | in this information to identify your case: | | | | |
|----------------|---|--|-------------|--|-------------------------------|
| | in this information to identify your case. | | | | |
| Debt | Linda Marie Cisar | | | c if this is: | |
| Debt | otor 2 | | | An amended filing A supplement show | ing postpetition chapter |
| (Spc | ouse, if filing) | ' | | 13 expenses as of t | |
| Unite | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS | | 1 | MM / DD / YYYY | |
| Case | se number | | | | |
| (If kr | (nown) | | | | |
| Of | fficial Form 106J | | | | |
| Sc | chedule J: Your Expenses | | | | 12/15 |
| Be a | as complete and accurate as possible. If two married people are filing to ormation. If more space is needed, attach another sheet to this form. On mber (if known). Answer every question. | | | | |
| Part | It 1: Describe Your Household Is this a joint case? | | | | |
| ١. | | | | | |
| | ■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in a separate household? | | | | |
| | □ No | | | | |
| | ☐ Yes. Debtor 2 must file Official Form 106J-2, <i>Expenses for Sepa</i> | rate Household of | Debte | or 2. | |
| 2. | Do you have dependents? ■ No | | | | |
| | | dent's relationship t 1 or Debtor 2 | • | Dependent's age | Does dependent live with you? |
| | Do not state the | | | | □ No |
| | dependents names. | | | | Yes |
| | | | | | □ No |
| | | | | | ☐ Yes ☐ No |
| | | | | | □ Yes |
| | | | | | □ No |
| | | | | | ☐ Yes |
| 3. | Do your expenses include expenses of people other than | | | | |
| | yourself and your dependents? | | | | |
| Esti exp | Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless you are us penses as of a date after the bankruptcy is filed. If this is a supplemental plicable date. | | | | |
| the | lude expenses paid for with non-cash government assistance if you know value of such assistance and have included it on Schedule I: Your Inconficial Form 106I.) | | | Your expe | nses |
| 4. | The rental or home ownership expenses for your residence. Include first payments and any rent for the ground or lot. | | 1. \$ | | 0.00 |
| | If not included in line 4: | | | | |
| | 4a. Real estate taxes | 48 | a. \$ | | 0.00 |
| | 4b. Property, homeowner's, or renter's insurance | 41 | o. \$ | | 0.00 |
| | 4c. Home maintenance, repair, and upkeep expenses | | c. \$ | | 0.00 |
| 5. | 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as home equity | | d. \$ 5. \$ | | 0.00 0.00 |
| ◡. | , talantionian montgago paymonto for your restudince, such as notife Edully | iouio i | , ψ | | W-W |

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| Debtor 1 Linda M | arie Cisar | Case num | ber (if known) | |
|---------------------------------------|---|---------------|-------------------|------------------------------|
| 6. Utilities: | | | | |
| 6a. Electricity | , heat, natural gas | 6a. | \$ | 0.00 |
| 6b. Water, se | wer, garbage collection | 6b. | \$ | 25.00 |
| 6c. Telephon | e, cell phone, Internet, satellite, and cable services | 6c. | \$ | 100.00 |
| 6d. Other. Sp | ecify: | 6d. | \$ | 0.00 |
| . Food and hous | ekeeping supplies | 7. | \$ | 200.00 |
| . Childcare and | children's education costs | 8. | \$ | 0.00 |
| . Clothing, laund | ry, and dry cleaning | 9. | \$ | 0.00 |
| 0. Personal care | products and services | 10. | \$ | 25.00 |
| 1. Medical and de | ntal expenses | 11. | \$ | 0.00 |
| | . Include gas, maintenance, bus or train fare. | | | 75.00 |
| Do not include of | | 12. | · | 75.00 |
| | clubs, recreation, newspapers, magazines, and books | 13. | | 0.00 |
| 4. Charitable con | ributions and religious donations | 14. | \$ | 0.00 |
| 5. Insurance. | | | | |
| | surance deducted from your pay or included in lines 4 or 20. | | • | |
| 15a. Life insur | | 15a. | · | 200.00 |
| 15b. Health ins | | 15b. | · | 238.00 |
| 15c. Vehicle in | | 15c. | | 92.00 |
| 15d. Other ins | | 15d. | \$ | 0.00 |
| | clude taxes deducted from your pay or included in lines 4 or 20. | _ | | |
| Specify: | | 16. | \$ | 0.00 |
| 7. Installment or | | | _ | |
| | ents for Vehicle 1 | 17a. | · | 258.00 |
| | ents for Vehicle 2 | 17b. | | 0.00 |
| 17c. Other. Sp | ecify: | 17c. | \$ | 0.00 |
| 17d. Other. Sp | ecify: | 17d. | \$ | 0.00 |
| | of alimony, maintenance, and support that you did not report as | | • | 0.00 |
| | your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18. | · . | 0.00 |
| | s you make to support others who do not live with you. | | \$ | 0.00 |
| Specify: | | 19. | | |
| | erty expenses not included in lines 4 or 5 of this form or on Sch | | | |
| | s on other property | 20a. | · | 0.00 |
| 20b. Real esta | | 20b. | · | 0.00 |
| | homeowner's, or renter's insurance | 20c. | | 0.00 |
| | nce, repair, and upkeep expenses | 20d. | * | 0.00 |
| | er's association or condominium dues | 20e. | \$ | 0.00 |
| Other: Specify: | pet care | 21. | +\$ | 200.00 |
| storage fee | | | +\$ | 183.00 |
| Coloulete | monthly expenses | | | |
| 2. Calculate your 22a. Add lines 4 | monthly expenses | | \$ | 1 506 00 |
| | <u> </u> | | \$ | 1,596.00 |
| | 2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2 | | · <u> </u> | |
| 22c. Add line 22 | a and 22b. The result is your monthly expenses. | | \$ | 1,596.00 |
| 3. Calculate vour | monthly net income. | | | |
| | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 1,619.00 |
| | monthly expenses from line 22c above. | 23b. | · | 1,596.00 |
| 200. Oopy you | | 200. | | 1,030.00 |
| 23c. Subtract v | our monthly expenses from your monthly income. | | | |
| | is your monthly net income. | 23c. | \$ | 23.00 |
| | • | | | |
| | an increase or decrease in your expenses within the year after y | | | |
| | ou expect to finish paying for your car loan within the year or do you expect you | ur mortgage p | payment to increa | ase or decrease because of a |
| _ | terms of your mortgage? | | | |
| ■ No. | | | | |
| ☐ Yes. | Explain here: | | | |

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| Fill in this info | rmation to identify your | case: | | | |
|---------------------|--|--------------------------|--------------------------|--------------------------|--|
| Debtor 1 | Linda Marie Cisa | r | | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States B | ankruptcy Court for the: | NORTHERN DISTRICT | OF ILLINOIS | | |
| Case number | | | | | |
| (if known) | | | | | ☐ Check if this is an |
| | | | | | amended filing |
| | | | | | |
| Official For | m 106Dec | | | | |
| | | ın Individual | Dobtor's S | chodulos | |
| Deciara | tion About a | iii iiiuiviuuai | Deproi 2 3 | chedules | 12/15 |
| obtaining mone | | n connection with a bank | | | ement, concealing property, or 10, or imprisonment for up to 20 |
| Sig | gn Below | | | | |
| Did you p | ay or agree to pay some | one who is NOT an attor | ney to help you fill out | bankruptcy forms? | |
| ■ No | | | | | |
| ☐ Yes. | Name of person | | | Attach Bank | kruptcy Petition Preparer's Notice, |
| | | | | Declaration | , and Signature (Official Form 119) |
| | alty of perjury, I declare re true and correct. | that I have read the sum | mary and schedules fi | led with this declaratio | on and |
| X /s/ Lir | nda Marie Cisar | | X | | |
| | Marie Cisar ure of Debtor 1 | | Signature of | of Debtor 2 | |

Date

Date **February 20, 2017**

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| Debtor 1 | Linda Marie Cisar | • | | | |
|---|---|---|---|------------------------------------|------|
| 200101 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| | Bankruptcy Court for the: | NORTHERN DISTRICT OF | | | |
| _ | Zammaptoy Countries unos | | | | |
| Case number (if known) | | | | Check if this is an amended filing | |
| Statemer | | | als Filing for Bankruptcy | upplying correct | 4/ |
| nformation. If umber (if kno | more space is needed, a wn). Answer every quest | attach a separate sheet to thi ion. | s form. On the top of any additional page | | |
| Part 1: Give | e Details About Your Mar | ital Status and Where You Li | ved Before | | |
| | | | | | |
| . What is yo | our current marital status | s? | | | |
| ☐ Marrie | ed | ? | | | |
| ☐ Marrie | | :? | | | |
| ☐ Marrie ■ Not m | ed narried | eved anywhere other than wh | ere you live now? | | |
| ☐ Marrio ■ Not m During the | ed narried e last 3 years, have you li | | · | | |
| ☐ Marrie ☐ Not m During the ☐ No ☐ Yes. I | ed narried e last 3 years, have you li | ved anywhere other than wh | · | Dates Debtor 2 | |
| ☐ Marrie ☐ Not m 2. During the ☐ No ☐ Yes. ☐ Debtor 1 3116 Ric | ed narried e last 3 years, have you li List all of the places you liv | ved anywhere other than where other than where other than where other than where other than the last 3 years. Do not in the last 3 years. | nclude where you live now. | | |
| ☐ Marrie ☐ Not m 2. During the ☐ No ☐ Yes. I Debtor 1 3116 Ric Las Veg | ed narried e last 3 years, have you li List all of the places you liv Prior Address: chland Drive | red in the last 3 years. Do not in Dates Debtor 1 lived there From-To: 11/2015 to | Debtor 2 Prior Address: | lived there Same as Debi | or 1 |

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Page 30 of 47 Case number (if known) Document Debtor 1 Linda Marie Cisar Part 2 **Explain the Sources of Your Income** Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) For the calendar year before that: \$6,353.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2015) bonuses, tips bonuses, tips ☐ Operating a business Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support: Social Security, unemployment. and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Nο Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from **Gross income** Describe below. Describe below. (before deductions each source (before deductions and and exclusions) exclusions) From January 1 of current year until \$1,086.00 the date you filed for bankruptcy: For last calendar year: SSA \$13.032.00 (January 1 to December 31, 2016) For the calendar year before that: unemployment \$15,080.00 (January 1 to December 31, 2015) compensation SSA \$1,790,00 Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

□ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

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Case number (if known) Document Debtor 1 Linda Marie Cisar Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... paid still owe Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Insider's Name and Address Dates of payment **Total amount** Amount you Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Amount you Insider's Name and Address Dates of payment **Total amount** Reason for this payment still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Describe the Property Value of the Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No П Yes

Official Form 107

Case 17-04904

8.

Doc 1

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Case number (if known) Document Debtor 1 Linda Marie Cisar

| Pa | tt 5: List Certain Gifts and Contributions | | | |
|-----|--|--|-----------------------------------|---------------------------|
| 13. | Within 2 years before you filed for bankrupto No Yes. Fill in the details for each gift. | ey, did you give any gifts with a total value of more | than \$600 per person | ? |
| | Gifts with a total value of more than \$600 per person | Describe the gifts | Dates you gave the gifts | Value |
| | Person to Whom You Gave the Gift and Address: | | | |
| 14. | Within 2 years before you filed for bankrupto ■ No □ Yes. Fill in the details for each gift or contri | ey, did you give any gifts or contributions with a tot | al value of more than | \$600 to any charity? |
| | Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) | | Dates you contributed | Value |
| Pa | tt 6: List Certain Losses | | | |
| 15. | Within 1 year before you filed for bankruptcy or gambling? No Yes. Fill in the details. | or since you filed for bankruptcy, did you lose any | thing because of the | ft, fire, other disaster, |
| | Describe the property you lost and how the loss occurred | scribe any insurance coverage for the loss lude the amount that insurance has paid. List pending urance claims on line 33 of Schedule A/B: Property. | Date of your loss | Value of property lost |
| Pa | tt 7: List Certain Payments or Transfers | | | |
| 16. | consulted about seeking bankruptcy or prep | r, did you or anyone else acting on your behalf pay aring a bankruptcy petition? arers, or credit counseling agencies for services require | | erty to anyone you |
| | ☐ No ■ Yes. Fill in the details. | | | |
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | William Teitelbaum c/o Donald Leibsker 10 S. LaSalle Street, Suite 1230 Chicago, IL 60603 lawbrt@aol.com | Attorney Fees | | \$1,000.00 |
| 17. | Within 1 year before you filed for bankruptcy promised to help you deal with your creditor Do not include any payment or transfer that you | | or transfer any prope | erty to anyone who |
| | Yes. Fill in the details. | | | |
| | Person Who Was Paid Address | Description and value of any property transferred | Date payment or transfer was made | Amount of payment |
| | | | | |

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Case number (if known) Document Debtor 1 Linda Marie Cisar 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or Address property transferred payments received or debts made paid in exchange Person's relationship to you **Elmhurst Toyota** 2007 Toyota Solara \$10,000 09/2015 440 W. Lake Street Elmhurst, IL 60126 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Description and value of the property transferred Name of trust **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No п Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Date account was Last balance Type of account or

Address (Number, Street, City, State and ZIP instrument closed, sold, before closing or account number Code) moved, or transfer transferred XXXX-**Chase Bank** 11/2016 \$5,000.00 ☐ Checking Oakbrook Terrance, IL Savings ☐ Money Market □ Brokerage □ Other

21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?

■ No

Yes. Fill in the details.

Name of Financial Institution

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

State and ZIP Code)

Describe the contents

have it?

22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?

■ No

☐ Yes. Fill in the details.

Name of Storage Facility

Address (Number, Street, City, State and ZIP Code)

Who else has or had access to it?

Address (Number, Street, City, State and ZIP Code)

Address (Number, Street, City, State and ZIP Code)

Part 9: Identify Property You Hold or Control for Someone Else

23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

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Case number (if known) Document

Debtor 1 Linda Marie Cisar

| | for someone. | | | |
|-----|--|---|---------------------------------------|-----------------------|
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Owner's Name Address (Number, Street, City, State and ZIP Code) | Where is the property? (Number, Street, City, State and ZIP Code) | Describe the property | Value |
| Par | rt 10: Give Details About Environmental Ir | nformation | | |
| For | the purpose of Part 10, the following defini | itions apply: | | |
| | Environmental law means any federal, sta toxic substances, wastes, or material into regulations controlling the cleanup of the | the air, land, soil, surface water, ground | • | |
| | Site means any location, facility, or prope to own, operate, or utilize it, including dis | | law, whether you now own, operate, | or utilize it or used |
| | Hazardous material means anything an er hazardous material, pollutant, contaminar | | s waste, hazardous substance, toxic | substance, |
| Rep | port all notices, releases, and proceedings t | hat you know about, regardless of when | n they occurred. | |
| 24. | Has any governmental unit notified you th | at you may be liable or potentially liable | under or in violation of an environm | nental law? |
| | ■ No □ Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice |
| 25. | Have you notified any governmental unit of | of any release of hazardous material? | | |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State an ZIP Code) | Environmental law, if you know it | Date of notice |
| 26. | Have you been a party in any judicial or ac | , | ironmental law? Include settlements | and orders. |
| | ■ No | | | |
| | Yes. Fill in the details. | | | |
| | Case Title Case Number | Court or agency Name Address (Number, Street, City, State and ZIP Code) | Nature of the case | Status of the case |
| Par | rt 11: Give Details About Your Business o | r Connections to Any Business | | |
| 27. | Within 4 years before you filed for bankru | ptcv. did vou own a business or have ar | ny of the following connections to an | v business? |
| | <u> </u> | I in a trade, profession, or other activity, | | ., |
| | _ | npany (LLC) or limited liability partnersh | • | |
| | ☐ A partner in a partnership | . , , , , , , , , , , , , , , , , , , , | , | |
| | ☐ An officer, director, or managing e | executive of a corporation | | |
| | _ | ing or equity securities of a corporation | | |

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Case number (if known) Document Debtor 1 Linda Marie Cisar No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. Name Date Issued **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Linda Marie Cisar Signature of Debtor 2 **Linda Marie Cisar** Signature of Debtor 1 Date February 20, 2017 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person

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| Fill in this inform | nation to identify yo | our case: | | | |
|---------------------------------|-------------------------------|--------------------------|--|--|----------|
| Debtor 1 | Linda Marie Ci | | | | |
| Dobtor 2 | First Name | Middle Name | Last Name | | |
| Debtor 2 (Spouse if, filing) | First Name | Middle Name | Last Name | | |
| United States Bar | nkruptcy Court for the | o. NORTHERN DIS | FRICT OF ILLINOIS | | |
| Officed States Bar | inkruptcy Court for the | e. NORTHERN DIS | TRICT OF ILLINOIS | | |
| Case number _ | | | | | |
| (if known) | | | | ☐ Check if this is an | |
| | | | | amended filing | |
| | | | | | |
| Official For | rm 108 | | | | |
| | | ion for Indiv | iduals Filing Under (| Chapter 7 | |
| Statemen | it or intent | ion for indiv | iduals Filling Officer | | |
| If you are an indi- | vidual filing under o | chapter 7, you must fil | Lout this form if | | |
| | claims secured by | | rout this form ii. | | |
| _ | • | ty and the lease has n | ot expired | | |
| - | | - | - | y the date set for the meeting of creditors, | |
| whiche | ver is earlier, unles: | | | copies to the creditors and lessors you list | : |
| on the f | orm | | | | |
| If two married pe | ople are filing toget | ther in a joint case, bo | th are equally responsible for supplyir | ng correct information. Both debtors must | |
| sign an | d date the form. | • | | | |
| Be as complete a | and accurate as pos | ssible. If more space is | s needed, attach a separate sheet to th | is form. On the top of any additional pages | . |
| | our name and case | | | romania page | , |
| | | | | | |
| Part 1: List Yo | our Creditors Who F | lave Secured Claims | | | |
| • | • | n Part 1 of Schedule D | : Creditors Who Have Claims Secured | by Property (Official Form 106D), fill in the | ; |
| information be | low. editor and the proper | ty that is collatoral | What do you intend to do with the p | property that Did you claim the proper | 41/ |
| identity the ore | and the proper | ty that is condicion | secures a debt? | as exempt on Schedule | |
| | | | | | |
| Out distants - T | | • | | _ | |
| Creditor's To | oyota Financial S | ervices | ☐ Surrender the property. | □ No | |
| name. | | | Retain the property and redeem it. | ■ | |
| Description of | 2014 Toyota Co | rolla 43,900 | Retain the property and enter into a | a Fes | |
| property | miles | • | Reaffirmation Agreement. Retain the property and [explain]: | | |
| securing debt: | | | Tretain the property and [explain]. | | |
| - | | | | | |
| | | onal Property Leases | | | |
| For any unexpire | d personal property | y lease that you listed | in Schedule G: Executory Contracts a | nd Unexpired Leases (Official Form 106G) in effect; the lease period has not yet end | fill |
| | | | the trustee does not assume it. 11 U.S. | | ;u. |
| | | | | 5 (F/C) | |
| Describe your u | nexpired personal p | property leases | | Will the lease be assumed? | |
| Lessor's name: | | | | П | |
| Description of lea | ised | | | □ No | |
| Property: | | | | ☐ Yes | |
| | | | | | |
| Lessor's name: | | | | □ No | |
| Description of lea | ised | | | | |
| Droportin | | | | - | |
| Property: | | | | ☐ Yes | |

Statement of Intention for Individuals Filing Under Chapter 7

Official Form 108

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| Debtor | 1 Linda Marie Cisar | Case number (if known) | |
|--------------------|--|---|----|
| Descrip Propert | otion of leased | ☐ Yes | |
| Порон | y. | Li res | |
| | 's name: otion of leased | □ No | |
| Propert | | ☐ Yes | |
| | 's name: otion of leased | □ No | |
| Propert | | ☐ Yes | |
| | 's name: | □ No | |
| Propert | otion of leased ty: | ☐ Yes | |
| | 's name: | □ No | |
| Descrip Propert | otion of leased ty: | ☐ Yes | |
| Part 3: | Sign Below | | |
| | penalty of perjury, I declare that I have indicated my intention about any py that is subject to an unexpired lease. | property of my estate that secures a debt and any persona | ıl |
| χ /s | / Linda Marie Cisar X | | |
| | inda Marie Cisar Signa gnature of Debtor 1 | ature of Debtor 2 | |
| Da | ate February 20, 2017 Date | | |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapte | r 7: | Liquidation |
|--------|-------|--------------------|
| | \$245 | filing fee |
| | \$75 | administrative fee |
| + | \$15 | trustee surcharge |
| | \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 17-04904 Doc 1 Filed 02/21/17 Entered 02/21/17 10:17:02 Desc Main Document Page 42 of 47

82030 (Form 2030) (12/15)

United States Bankruptcy Court Northern District of Illinois

| In re | LLUUH | 1941(1 | K (18411) | | | Case No. | 1 |
|---------------|---|--|---|--|--|-------------------------------------|---|
| _ | | | ······································ | Debtor(s) | | Chapter | 7 |
| | DISC | CLOSURE | OF COMPE | NSATION OF A | TTORNEY I | OR DE | BTOR(S) |
| com | spensation paid to endered on behalf | me within one of the debtor(s | year before the filings) in contemplation | of or in connection with | cruptey, or agreed the bankruptcy ca | to be paid to | o me, lof services rendered of to |
| | For legal service | s, I have agree | d to accept | | \$ | 1000. | <u>y</u> . |
| | Prior to the filing | g of this statem | ent I have received | , papers of Foot word a street of the same of the same state of th | | 1,000. | |
| | Balance Due | | | | \$ | 1.6 | |
| 2. The | source of the con | npensation paid | i to me was: | | | | |
| | Debtor | Other (s | pecify); | • | | | • |
| 3. The | source of compe | nsation to be pa | aid to me is: | | | | |
| | ☐ Debtor | Other (s | pecify): | | | | |
| 4. | I have not agreed | to share the ab | oove-disclosed com | pensation with any other | person unless the | y are meinb | ers and associates of my law firm. |
| Ø. | I have agreed to s | share the above ment, together | e-disclosed compens with a list of the na | sation with a person or p mes of the people shari | ersons who are no | nt members of | or associates of my law firm. A ched. Donald Lelbsker Esq. |
| 5. In | return for the abov | ve-disclosed fe | c, I have agreed to r | ender legal service for a | ll aspects of the b | ankruptcy ca | ase, including: |
| b. c. | Preparation and fi Representation of [Other provisions Negotiatio reaffirmati | iling of any pet the debtor at the as needed] ons with sect ion agreemen | ition, schedules, sta he meeting of credit ared creditors to nts and applicati | tement of affairs and pla fors and confirmation he reduce to market va | an which may be r aring, and any adj lue; exemption | equired; oumed hear planning; | ile a petition in bankruptcy; ings thereof; preparation and filing of ons pursuant to 11 USC |
| 6. By | agreement with the | he debtor(s), the | e above-disciosed fo | ee does not include the f | ollowing service: | | |
| | | | | CERTIFICATION | | | |
| I c. ihis ban | krupicy proceedin | going is a com g.) U T | plete statement of a | William To Signature of William To Cio Donal 10 S. LaS Chicago, 630-202-8 fax: 312-Name of the Donald Li | attelbaum 6274: Attorney Attorney Itelbaum d Leibsker alle Street, Suit IL 60603 405 724-8626 aw firm alle Street, Esq. alle Street, Suit | 1230 | epresentation of the debtor(s) in |

William Teitelbaum Attorney and Counselor At Law

Contract For Bankruptcy Services

| This agreement is executed this | 37^{1H} day of | JANUARY | _, 2017, by and |
|---|-------------------|---------------------|------------------|
| between William Teitelbaum and Donald Relief Agency") and LWDA MAR | Leibsker (here | inafter the "Attorn | eys" and "A Debt |
| Relief Agency") and LIUDA MAK | IE USAR | and | |
| (| hereinafter "Clie | ent(s)," whether on | e or more). The |
| parties agree as follows: | | | |

Type of Bankruptcy

Client retains attorney to file a Chapter 7 bankruptcy. If the Client determines at a later date that the Client desires to file a Chapter 13 bankruptcy, the parties shall execute a new contract setting forth the terms of the legal representation.

Services Provided by Attorney

- · Analysis of your financial condition;
- Advise you as to the advisability of seeking relief in bankruptcy under either Chapter 7 or Chapter 13 of the Bankruptcy Code;
- Assist you in assembling all documents necessary for or in connection with the filing of a
 petition under the Bankruptcy Code;
- · Advise you as to availability of exemptions under applicable law;
- Assist you in meeting all conditions precedent as to filing for relief under the Bankruptcy Code and in meeting all conditions precedent to obtaining a discharge, if you are eligible to receive a discharge;
- Prepare you for examinations at the meeting of creditors pursuant to Section 341 of the Bankruptcy code and accompany you to the meeting;
- Assist you with affirmation agreements, if applicable;
- Assist you in the enforcement of the automatic stay if required;
- Arrange for electronic filing of your bankruptcy petition and supporting papers;
- Communicate with your bankruptcy Trustee;
- Communicate with your creditors, if necessary; and
- Assist in arranging for a pre-discharge financial course.

Fees and Terms of Payment

- The filing fee of Chapter 7 bankruptcy is \$335.00 and must be remitted before the bankruptcy petition can be filed in Federal Court. The filing fee is a court cost over and above the Attorney fee.
- The Client agrees to pay an Attorney fee of 100. 10 for the Chapter 7 bankruptcy.
- The Client and Attorney will negotiate a new fee agreement for services rendered beyond those services listed in Services Provided by Attorney.

You are aware that attorneys Donald Leibsker, and William Teitelbaum will be working on your case and will be sharing fees that you have paid. The Client understands that if the Client does not pay the fees as set out above, the Attorney has no obligation to provide the service, and has the right to file a motion to withdraw as the Attorney for the Client in this case.

Services Not Provided Under the Attorney Fee

- Additional creditors' examination;
- Court appearances beyond the first creditor's examination;
- · Adversary proceedings;
- · Amendments to the original petition;
- Judicial lien avoidances; and
- Any other services, such as defense of a complaint to determine discharge ability of a
 debt or of a United States Trustee motion to convert this case or dismiss it as an abusive
 filing.

Client's Obligations

- · To pay the fees as set out above;
- To provide accurately and honestly all the information necessary to prepare and file the Chapter 7 bankruptcy;
- · To keep the Attorney advised at all times of the Client's address and telephone numbers;
- To attend the 341 Creditors' Meeting and any other hearings set in the case;
- To provide any information requested of the Client by the Trustee, or any other party in the case, unless the Court rules that the Debtor is not required to provide the information;
 and
- To respond immediately to any requests of the Client by the Attorney.

As a separate document, but included as part of this representation agreement, we are giving you notice of "Important Information About the Bankruptcy Assistance Services from an Attorney" as required by Section 527 of the Bankruptcy Reform Act.

This agreement represents the complete agreement between the parties and may not be

| Case 17-04904 | | Filed 02/21/17 Document exceptions exceptions agreement exceptions agreement exceptions are agreement exceptions. | Entered 02/21/17 10:17:02 Page 45 of 47 cured by the parties. | Desc Main |
|-------------------|---|--|---|-----------|
| Dated: 01/27/2017 | <u>, </u> | | Attorney A Debt Relief Agency | - |
| Dated: 01/27/2017 | | • | Attorney A Debt Relief Agency | · |
| Dated: 01/27/2017 | | | Squela Mirus Closar Client | |
| Dated: | | ٠. | Client | |

United States Bankruptcy Court Northern District of Illinois

| In re | Linda Marie Cisar | | Case No. | |
|-------|--|---|---------------|---------------------------|
| | | Debtor(s) | Chapter | 7 |
| | VE | RIFICATION OF CREDITOR MA | TRIX | |
| | | Number of Co | reditors: _ | 7 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of creditor | s is true and | correct to the best of my |
| Date: | February 20, 2017 | /s/ Linda Marie Cisar Linda Marie Cisar Signature of Debtor | | |

Capital One PO Box 30281 Salt Lake City, UT 84130-0281

Chase PO Box 15298 Wilmington, DE 19850-5298

Citi Cards PO Box 6241 Sioux Falls, SD 57117

Citi Cards PO Box 6500 Sioux Falls, SD 57117

Discover PO Box 15316 Wilmington, DE 19850

Kohl's PO Box 3115 Milwaukee, WI 53201

Toyota Financial Services PO Box 5855 Carol Stream, IL 60197